

**AGENCY PERFORMANCE PLAN
FY 2009**

Name of Agency: Department of Inspections and Appeals			
Agency Mission: "To assure state and federal program integrity by adjudicating, examining, and enforcing compliance to protect the health, safety and welfare of Iowans."			
Core Function	Outcome Measure(s)	Outcome Target	Link to Strategic Plan Goal(s)
CF: Adjudication/Dispute Resolution			DIA Goal #2 – Enhance customer-centered services and satisfaction. DIA Goal #3 – Meet all state and federal performance standards, efficiently and effectively. EAB Goal #1– Continue to increase compliance with state and federal laws.
Desired Outcome(s): Citizens are afforded due process for adverse actions taken by state agencies.	Percentage of DHS all other appeals proposed decision issued within 65 days of receipt from DHS.	95%	
	Percentage of DOT OWI appeals heard within 45 days of receipt of request for hearing.	95%	
Timely adjudication of the rights and duties of workers and employers under unemployment insurance (UI) laws.	Average age of pending Unemployment Insurance appeal cases compared to the federal Department of labor guidelines of 40 days.	12 days	
Timely adjudication of contested OSHA violations.	Percentage of decisions not appealed to district court.	85%	
	Percentage of decisions issued within 14 days of Board review.	90%	
Timely adjudication of contested construction contractor registration violations	Percentage of decisions issued within 14 days of Board hearing.	90%	
Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
1. Administrative Hearings Org # 3101, 3301, 3501, 3701 A. DHS all other hearings B. DOT OWI appeals	Average turnaround time for issuing DHS all other appeals proposed decisions compared to the required timeframe of within 65 days of receipt from DHS.	65 days	ALJ division time standards decisions must be issued within 30 days of closing the record.

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
	Average turnaround time for hearing DOT OWI appeals compared to the required timeframe of within 45 days of receipt of request for hearing.	45 days	
	Percentage of DOT proposed decisions issued that were affirmed by the DOT.	95%	Ensure mandatory compliance by ALJs with Code of Administrative Judicial Conduct.
57. Employment-Related Appeals Org. # 7200, 7700	Average age of pending Unemployment Insurance appeal cases compared to the federal Department of labor guidelines of 40 days.	12 days	<ul style="list-style-type: none"> • Maintain daily agendas. • Utilize new checkpoint system to download voice files from Iowa Workforce Development to save time and speed up transcription process.
			Board use of voice file recordings to alleviate transcript workload.
	Percentage of OSHA decisions issued within 14 days of review by Board.	90%	Schedule administrative law judge hearing within 20 days of receipt of answer.
57. Regulatory Appeals Org. #7700	Percentage of Contractor Registration decisions issued within 14 days of hearing by Board.	90%	<ul style="list-style-type: none"> • Utilize temp staffing if needed to timely process case flow and decisions. • Communicate importance of timeliness standards with staff.

Core Function	Outcome Measure(s)	Outcome Target	Link to Strategic Plan Goal(s)
CF: Advocacy			CAB Goal #1: All children involved with the CASA and ICFCRB programs will receive high quality advocacy services that contribute to their safety, well-being and permanency.
Desired Outcome(s):			
Safety and permanency for children in the child welfare system.	Percent of children safe from re-abuse.	99.4%	
	Percent of children re-unified timely.	83%	
	Percent of children adopted timely.	57.5%	
Activities, Services, Products	Outcome Measure(s) Performance Measures	Outcome Target Performance Target(s)	Link to Strategic Plan Goal(s) Strategies/Recommended Actions
1. Foster Care Review Boards: Issue review findings & recommendations. Org# 0310, 0320, 0325	Percentage of required reviews conducted within specified timeframes.	98%	Provide for high quality volunteer recruitment, screening, training and support activities. Solicit program quality improvement suggestions from employees, volunteers and interested parties.
2. Court Appointed Special Advocates: Submit court report with recommendations. Org # 0310, 0400	Percentage of reports submitted to the court within specified timeframes.	98%	Provide for high quality volunteer recruitment, screening, training and support activities. Solicit program quality improvement suggestions from employees, volunteers and interested parties.

Core Function	Outcome Measure(s)	Outcome Target	Link to Strategic Plan Goal(s)
CF: Legal Representation			SPD Goal #1 – Achieve quality representation of clients by public defender offices. SPD Goal #2 – Maintain economic efficiency of indigent defense programs by maximizing use of public defender resources while maintaining quality representation. SPD Goal #3 – Maintain a process for the review and adjudication of indigent defense claims that produces correct results within a reasonable time.
Desired Outcome(s):			
Provide high-quality and cost-efficient representation by public defenders to indigent clients in State criminal court, juvenile court, and other proceedings as required by law.	Percentage of public defender cases where there have been final findings of ineffective assistance of counsel, either on direct appeal of convictions, after post-conviction relief actions, or (for civil commitments) habeas corpus actions.	1%	
	Percentage of caseload performance expectations achieved by the State Public Defender (SPD) System.	95% of 70,000 cases	
Prompt and fair review and adjudication of claims for payment of indigent defense fees and costs from indigent defense providers.	Percentage of challenged Notices of Action on indigent defense claims that are upheld upon final judicial review.	90%	
	Percentage of indigent defense claims reviewed and acted upon (approved or disapproved) within 35 days of receipt.	90%	
	Average processing time for an indigent defense claim within an established standard.	35 days	

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
1. Public Defender Legal Services Org# 9710, 9715, 9717, 9720, 9723, 9725, 9726, 9730, 9735, 9740, 9750, 9752, 9755, 9760, 9761, 9770, 9780, 9785, 9810, 9811, 9820, 9825 A. Trial Division B. Appellate Division C. Civil Commitment Unit	Percentages of cases with final findings of ineffective assistance on direct appeal of convictions, post-conviction relief, commitments, or habeas corpus actions.	1%	<ul style="list-style-type: none"> • Funding to keep offices fully staffed. • Recruit and hire the best attorneys, investigators, and administrators. • Provide or coordinate resources, information, training, and professional development.
	Percentage of caseload expectations achieved.	95% of 70,000 cases	<ul style="list-style-type: none"> • Establish caseload performance expectations for the SPD System and public defender field offices. • Engage with judges and public defender field offices to ensure that public defender field offices are receiving appointments in all cases for which they are designated. • Review public defender caseloads to maintain quality service.
2. Assigned Counsel Legal Services Org# 9601, 9602, 9603, 9604, 9605, 9606, 9607, 9608, 9610, 9650, 9680 A. Adult Claims B. Juvenile Claims C. Appellate Claims D. Miscellaneous Claims	Final rulings upholding challenged Notices of Action.	90%	Publish and properly apply administrative rules and internal procedures that govern the indigent defense claims process.
	Percentage of claims acted upon within 35 days.	90%	Acquire and administer appropriate data automation systems to manage the indigent defense claim process.
	Average claim processing time.	35 days	Produce and review data concerning the propriety and timeliness of actions on indigent defense claims.

Core Function	Outcome Measure(s)	Outcome Target	Link to Strategic Plan Goal(s)
CF: Regulation and Compliance			IRGC Goal #1 – Achieve the highest possible voluntary compliance of statutes, rules and regulations. DIA Goal #2 – Enhance customer-centered services and satisfaction. DIA Goal #3 – Meet all state and federal performance standards, efficiently and effectively.
Desired Outcome(s):			
To protect the public from incidence of fraudulent or illegal activities in pari-mutuel, excursion boat, and social and charitable gambling and protect the health and welfare of the racing animals.	Percentage of horses inspected for health and fitness prior to a race.	80%	
	Percentage of occupational licensees receiving <u>no</u> serious violations after licensure.	80%	
	Number of social and charitable gambling referrals to DCI.	10	
	Percent of amusement device complaints received and referred to DCI that are investigated and substantiated.	10%	
To ensure only qualified businesses become certified as targeted small businesses to be eligible for the program opportunities.	Percentage of new applications submitted meeting the eligibility requirements.	90%	

Core Function	Outcome Measure(s)	Outcome Target	Link to Strategic Plan Goal(s)
To protect the public from incidence of serious disease and injury in food establishments.	Rate of individuals affected by a substantiated foodborne illness per 100,000 population.	27.5	
To enhance the safety, security and general welfare of the persons served in licensed/certified facilities and programs.	Percentage of actions for noncompliance upheld on Informal Dispute Resolution (IDR).	70%	
	Percent of founded cases of Dependent Adult Abuse in long-term care facilities.	30%	
To ensure misspent public assistance moneys obtained through fraud, inadvertent error, or agency error are identified and collected so that only eligible applicants receive public assistance moneys in the appropriate amounts.	Percentage of closed economic fraud investigations resulting in civil action (by public assistance program).	85% Family Investment Program 80% Food Assistance Program 80% Medicaid Program	
To provide necessary and timely information so the Department of Public health may appropriately address professional licensing complaints.	Rate of completion of professional standards investigations (pending and new referrals).	33.75%	
To ensure compliance with applicable federal and state financial requirements by DHS offices and nursing facilities.	Percentage of local DHS offices in compliance within 45 days.	100%	
	Percentage of care facilities in compliance within 60 days.	95%	

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
1. Pari-Mutuel and Excursion Gambling Boat Regulation Org# 8120, 8140 A Occupational license B Track or Boat license C Statute and rule compliance D Drug testing E Racing animal health and fitness inspections F. Revenue collection	Percentage of occupational licensees with initial issues receiving <u>no</u> serious violations after licensure.	75%	Streamline the eligibility determination process.
2. Social & Charitable Gambling Regulation Org #446A, 2601 A. Process application B. Make licensing decisions C. License quality applications D. Conduct complaint investigations E. Audit records F. Take revocation action G. Make enforcement referrals	Percentage of completed social and charitable gambling applications acted upon within five working days.	99%	Develop and implement an electronic web-based registration system with ability to accept credit card payments and with an integrated database.
	Percentage of applications returned for additional information.	25%	Make the application form and instructions easily understood and accessible to applicants and encourage the use of the new SCG electronic system to reduce the number of applications being returned for incomplete information.
	Number of amusement device registrations revoked or suspended.	15	Make requirements easily understood and accessible to registrants to reduce noncompliance issues.

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
3. Targeted Small Business certification Org# 2601 A. Process complete applications B. Review files C. Make certification decisions D. Participate on TSB Task Force E. Speak to groups on the benefits of becoming a TSB and how purchasers can utilize TSBs	Ratio of the number of TSB initial certifications compared to the previous Fiscal Year.	200:145	Continue giving presentations to business groups, chambers, business classes, etc., concerning certification eligibility standards, incentives and opportunities of the program.
	Percentage of applications processed within 21 days of receipt of all required documentation.	95%	Continue to work with the Department of Economic Development and the Department of Administrative Services in providing education and information sessions.
4. Food and Consumer Safety Org # 2501 A. Application processing B. Inspections C. Complaint investigations D. Foodborne illness investigations E. Contract management F. Licensing decisions G. Enforcement actions	Percentage of food establishment inspections conducted by state inspectors in compliance with the FDA Food Code.	75%	<ul style="list-style-type: none"> • Continue standardization of all staff in FDA Model Food Code every three years. • Acquire and train qualified inspectors to gain compliance with the FDA Food Code inspection frequency.
	Percentage of food service establishments that have Certified Food managers on staff.	25%	<ul style="list-style-type: none"> • Reduce the cost of the Manager Certification Course to accomplish more voluntary compliance. • Enhance the education and information efforts of the Food Safety Task Force to encourage voluntary compliance.

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
5. Regulatory oversight of state licensed and federally certified long-term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions E. Enforcement actions	Ratio of the average number of months between Nursing Facility surveys in comparison with the federal timeframe guidelines.	11.9:12 .9	<ul style="list-style-type: none"> • Utilize updated database to track and monitor survey frequency. • Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. • Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. • Utilize Program Coordinators to investigate complaints and assist with surveys when resource issues arise.
	Percent of ICF/MR surveys successfully completed within federally prescribed timeframe of 12.9 months since the last survey.	90%	Acquire and train qualified surveyors to secure and sustain a 100% survey frequency within 12.5 months.
	Percent of licensed only surveys successfully completed within prescribed timeframe of 18 months since the last survey.	95%	<ul style="list-style-type: none"> • Enhance education of surveyors, investigators, providers, stakeholders, and the public. • Program Coordinator monitoring of surveyor self-scheduling for ICF/MR and licensed only facilities.
	Percentage of complaint investigations initiated within required timeframes of 20 working days of receipt. If the potential of immediate jeopardy (harm) is determined, on-site investigation will be conducted within 48 hours.	95% within 20 working days 99% within 48 hours for potential immediate harm complaints	<ul style="list-style-type: none"> • Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. • Utilize Program Coordinators to investigate complaints and assist with surveys when resource issues arise.
	Average rating of the nursing home satisfaction questionnaire regarding the skill and professionalism of surveyors (inspectors) on a 5-point Likert Scale with 1 being poor and 5 being outstanding.	4.15	Utilize the Health Facilities Database to assist in scheduling and monitoring performance.
	Percentage of all deficiencies written that were harm level.	4%	Enhance education of surveyors, investigators, providers, stakeholders, and the public.

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
6. Monitor and regulation of state certified community based environments Org #5101 A. Application processing B. Monitoring evaluations C. Complaint investigations D. Certification decisions E. Enforcement actions	Percentage of assisted living program re-certifications completed at least 10 days prior to certification expiration date.	50%	Streamline assisted living program recertification paperwork and process. Consolidate the work of Certification coordinators to insure consistency and efficiency in dealing with corporately owned programs that cross Department prescribed geographical regions.
	Percentage of complaint investigations initiated within required timeframes for complaints of within 20 working days of receipt. If the potential of immediate harm is determined, on-site investigation will be conducted within 48 hours in 99% of the cases.	70% within 20 working days 99% within 48 hours for potential immediate harm complaints	Input resolution of Adult Services Bureau complaints into the Health Facilities Division database. Retention of all ASB staff at 100%.
	Average rating of the certificate holders satisfaction questionnaire regarding the skill and professionalism of monitors (inspectors) on a 5-point Likert Scale with 1 being poor and 5 being outstanding.	4.15	Enhance education of monitors, investigators, providers, stakeholders, and the public.
7. Investigations Services Org #4101, 4201, 4601, 4801, 4901 A. Economic Fraud B. Medicaid Fraud C. Professional Standards	Percentage of economic fraud investigation cases closed within statutory timeframes.	95%	<ul style="list-style-type: none"> • Review and update investigative procedures/protocol. • Prioritize cases.
	Amount of cost savings resulting from front-end investigations.	\$3 million	
	Number of food assistance electronic benefit transfer recipient cases referred by law enforcement.	150	Educate law enforcement, county prosecutors, federal prosecutors and retailers about how food assistance benefits are redeemed, sold, misused and the Electronic Benefit Transfer data that is maintained in the database system.
	Percentage of Medicaid fraud investigation cases will be reviewed and receive proper disposition within statutory timeframes.	95%	Review and update case protocols, as necessary, and include in policies and procedures.

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
	Number of founded dependent adult abuse criminal investigations referred for criminal prosecution.	80	Continue collaboration with the Abuse Coordinating Unit to deliver selected health care facilities investigation materials directly to county attorney for prosecution decision.
	Ratio of professional licensing investigations completed to total cases (pending and new referrals).	1:3	Maintain current efforts and continually seek ways and means to expedite professional licensing investigations and reduce the backlog
8. Collection Services Org # 4701, 4901	Dollars recovered from misspent public assistance, resulting from client error, fraud, or agency error, per year compared to the dollars recovered the previous year.	\$2.5 million FY09 compared to \$2.0 million FY08	Maintain current efforts and continually seek ways and means of increasing the amount of moneys collected
	Dollars collected under the Divestiture Program.	\$450,000	
9. Audit Services Org# 4501, 4901 A. DHS offices B. Health care facilities	Average number of months between audits for care facilities.	24	Maintain current efforts and continually seek ways and means of increasing the number of audits conducted and decreasing the amount of money collected.
	Rate of collection for moneys owed to care facility residents.	99.5%	Maintain current collection rate and seek to raise percentage to 100%.
	Rate of collection of moneys owed to the state.	100%	Maintain current collection rate.
	Average number of hours spent on-site auditing per facility.	11	Collaborate with the Iowa Medicaid Enterprise to streamline facility history profile reports used in the conduct of the audit.

Core Function	Outcome Measure(s)	Outcome Target	Link to Strategic Plan Goal(s)
CF: Resource Management			DIA Goal #1 – Create a flexible, responsive, and diverse work environment that promotes job satisfaction, team building, skill development and work force tenure. DIA Goal #2 – Enhance customer-centered services and satisfaction. DIA Goal #3 – Meet all state and federal performance standards, efficiently and effectively.
Desired Outcome(s):			
To provide consistently accurate and timely administrative and fiscal services to agency personnel so they can better provide their services to department constituencies.	Average rating of the resource management questionnaire regarding the accuracy and timeliness of services on a 5-point Likert Scale with 1 being poor and 5 being excellent.	4.25	
Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
1. Resource Management Org# 0101, 0199, 2101, 2201, 2301, 2401 A. Claims Processing B. Budget C. Inventory D. Financial Management E. Public Information F. Personnel G. Government Relations H. Indian Gaming I. Purchasing J. Vehicle Coordination K. Communication Coordination L. Grant Management M. Enterprise Management N. Information Technology O. Space Management	Percent of federal and state financial reports completed and submitted by due date.	95%	Develop a schedule of reports with due dates and provide to pertinent staff.

Activities, Services, Products	Performance Measures	Performance Target(s)	Strategies/Recommended Actions
	Percent of media and public information inquiries responded to within prescribed timeframes.	80% within 24 hours 99% within 72 hours	<ul style="list-style-type: none"> • Maintain current and accurate information on the website. • Identify opportunities for divisions and attached units at public events to share departmental information.
	Percent of budget funded by sources other than general fund.	67.3%	Identify and pursue grant opportunities for the department.
	Employee retention rate (non-retiree permanent employees).	97%	Performance evaluations will be conducted at three months for new employees to identify any workplace or satisfaction issues.
	Percent of employee evaluations completed by due date.	95%	Provide advance notice to supervisors of the due dates and follow-up with a reminder, as necessary.